				(•									
	Application or Clocket Number											ber			
ĺ	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								10075932						
Г	CLAIMS AS FILED - PART I									SMALL ENTITY OTHE					
TOTAL CLASS 24									ATE	T RE		RATE	FEE		
ma 12/26/01				10.000	96	MARKER EXTRA		<u> </u>	NEC FOR 170.00			BASIC FEE	740.00		
TOTAL CHARGEAGLE CLAIMS				4/						1	5				
-		",	us 20=			Ľ	<u></u>	<u> </u>	OR.	X318-	.12				
	DESCRIPTION OF			T mhus3=					13 -		08	X84=	84		
MATTPLE DEPONDENT CLASS PRESIDIT								+140-		ОЯ	+280=				
• If the difference in column 1 is less than zono, enter "O" in column 2								TR	TOL		ОЯ	TOTAL	896		
O(/ o Column 1) (Column 2) (Column 3)								61	ML	ENTITY	OTHER THAN SMALL ENTITY				
ENDMENTA		, B	COLS MUNIO PTER HOMENT		HEAL MARKET	ELEY EREA YARMO	PRESENT ENTRA	[ª	ATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE		
E	Total	. 7	14	Minus	- 2	4	.0	X	New.		OR	X\$18-			
	independent	•	4	Miras	- 4		•	 -	(2₂			X84.			
7	PAST PRESE	MIATI	ON OF M	ATPLE DE	PENDEY	TOLAN		1	423		CR	70.0	-		
		. 1						+1	₩.		CR	•280 -			
	04/18/05							400	ADDIT, FEE		ОЯ	YOUL ADDR PER			
(Cohenn 2) (Cohenn 3)															
AMENDMENT B		RE	ASS MANNAS FTER HOMENT		PREA		PRESENT EATHS	R	Œ	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
ş	Total	• (19	Minne	- 2	9	.6	×	9-		OR	X\$18=			
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-	FIRST PRESENTATION OF MATURE DEPENDENT CLAIM								40-		ОЯ	+280=			
	11011	0	5						IOIA LFEE		OR	ADOIT, FEE	Æ		
'		(Co	Auren 1)		(Cota	rn 2)	(Cotumn 5)					·			
EMC		RÉ.	COME ANGRIO FIED POPUEDITI		MEN	BER CUSLY FOR	PRESENT EXTRA	R	ĄE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MENDMENT	Total	•	7	Mires	- 2	4	.6	×	6 -		RO	X\$18-			
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L	FIRST PRESENTATION OF MILITIPLE DEPONDENT CLASM						\vdash	<u></u>	$\vdash \vdash$						
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" If the every in column 1 is less than the every in asison it, with "O' is column it." " If the every in column 1 is less than the every in asison it, with "O' is column it." " If the every in column 1 is less than the every in asison it." OR ADDIT. FEE. OR ADDIT. FEE.											4				
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COMPTONS (Name)

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	DATENT	ADDITIONT	ON EEE I		_	Application or Docket Number					
	PATENT			DETERMINAT	ION REC	OR 	D	10	02	5937	2
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA TYF	LL ENTITY	OR	OTHEI SMALL	R THAN ENTITY
FOR NUMBER FILED				NUMBER	NUMBER EXTRA			FEE		RATE	FEE
BASIC FEE								395.00	OR		
TOTAL CLAIMS			Minu	s24 ° €	• •			=	OR	x\$22=	
	EPENDENT CL		s4 · 0			x41=	:	OR	x82=		
	MULTIPLE DEPENDENT CLAIM PRESENT							=	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA		OR	TOTAL	A
CLAIMS AS AMENDED - PART II								<u> </u>	1 On	. 1	R THAN
	(Column 1) (Column 2)					1	SMA	LL ENTITY	OR		ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	=		x\$11=		OB	x\$22=	÷
AME	Independent	*	Minus	***	= .		x41=		OR	x82=	· I
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=	:	OR	+270=	·
	(Column 1) (Column 2) (Column 3				(Column 3)		TOTA		OR	TOTAL ADDIT. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	3	RATE	ADDI- TIONAL FEE		MELAINI RATEIR CHARLES	حصنات
AMENDM	Total	*	Minus	**	=		x\$11=		OR:	x\$22=	
	Independent	*	Minus ***		=		x41=		OR	x82=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							= -	OR	+270=	
		(Column 2)	(Column 3)	- 1 A	TOTA		OR	TOTAL ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=		x\$11=		OR	x\$22=	
	Independent	:	Minus	***	=		x41=		OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=	OR	+270=	
***	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							AL EE	OR.	TOTAL ADDIT. FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1											